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## TITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Docket Number (Optional) ASZD-P01-598

	In re Application of Mortlock et al.				
	Application Number			Filed	
	10/088856			March 21, 2002	
	For THERAPEUTIC QUINAZOLINE DERIVATIVES				
	Art Unit	1711	Examine	er I	Duc Truong
This is a request under the provisions identified application.					
The requested extension and appropr	iate non-small-er	ntity fee are as folk	ows (check	time period	desired):
One month (37 CFR 1.17(a)(1))				\$	
Two months (37 CFR 1.1	Two months (37 CFR 1.17(a)(2))				
x Three months (37 CFR 1.17(a)(3))				\$	950.00
Four months (37 CFR 1.17(a)(4))				\$	
Five months (37 CFR 1.17(a)(5))					
Applicant claims small entity status. See 37 CFR 1.27. Therefore, the tee amount shown above is					
reduced by one-half, and the resulting fee is: \$					
A check in the amount of the fee is enclosed.					
Payment by credit card. Form PTO-2038 is attached.					
x The Director has already been authorized to charge fees in this application to a Deposit Account.					
x The Director is hereby authorized to charge any fees which may be required, or credit any					
overpayment, to Deposit Account Number 18-1945					
I have enclosed a duplicate copy of this sheet.					
I am the applicant/inventor.					
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).					
x attorney or agent of	of record. Regist	ration Number _	48,	533	
attorney or agent under 37 CFR 1.34(a).					
Registration numb	er if acting under 3	7 CFR 1.34(a)	1 1	<u>,, , , , , , , , , , , , , , , , , , ,</u>	
August 12, 2004  Date  Curling Discontinuous Signature					
(617) 951-7085 Charles Larsen					
Telephone Number  Typed or printed name  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more					
NOTE: Signatures of all the inventors or assignees of record of the entire interest of their representative(s) are required. Submit multiple forms if more than one signature is required, see below					
Total of 1	f				

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: (due 1 2004

(Brigitte Crossman)